

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

WOMEN VOTE!

ADDRESS (number and street)

1800 M Street, NW

Ste 375N

Check if different
than previously
reported. (ACC)

Washington

DC

20036

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00473918

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☒ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
09 01 2016

through

M M M / D D D / Y Y Y Y Y Y
09 30 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Fines, Caroline, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Fines, Caroline, , ,

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
10 20 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

WOMEN VOTE!

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y
09		01		2016

To:

M M	/	D D	/	Y Y Y Y
09		30		2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <div>Y Y Y Y Y 2016</div>		<div>1525736.05</div>
(b) Cash on Hand at Beginning of Reporting Period.....	<div>3096519.24</div>	
(c) Total Receipts (from Line 19)	<div>5591167.50</div>	<div>23945623.71</div>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<div>8687686.74</div>	<div>25471359.76</div>
7. Total Disbursements (from Line 31).....	<div>4270388.72</div>	<div>21054061.74</div>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<div>4417298.02</div>	<div>4417298.02</div>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<div>0.00</div>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<div>0.00</div>	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

WOMEN VOTE!

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	1		2	0	1	6

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	1060750.00	8072818.53
(ii) Unitemized	463.00	5758.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	1061213.00	8078576.53
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	4433000.00	14840866.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	5494213.00	22919442.53
12. Transfers From Affiliated/Other Party Committees.....	96954.50	951954.50
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	74226.68
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	5591167.50	23945623.71
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	5591167.50	23945623.71

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	141378.31	2649549.53
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	141378.31	2649549.53
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	25000.00	750000.00
24. Independent Expenditures (use Schedule E)	4104010.41	17529512.21
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	125000.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	4270388.72	21054061.74
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4270388.72	21054061.74

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	5494213.00	22919442.53
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5494213.00	22919442.53
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	141378.31	2649549.53
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	74226.68
38. Net Operating Expenditures (subtract Line 37 from Line 36)	141378.31	2575322.85

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 38

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

WOMEN VOTE!

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Duggan, Theresa May, , ,

Mailing Address PO Box 290 7201 Pino Avenue

City

Tahoe Vista

State

CA

Zip Code

96148

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

community organizer

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 06 / 2016

Transaction ID : 4773138

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Kraus, Lisa, , ,

Mailing Address 4906 Shadywood Lane

City

Dallas

State

TX

Zip Code

75209

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Not-Employed

Occupation (for Individual)

Writer

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2016

Transaction ID : 4778000

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Cofrin, Gladys, , ,

Mailing Address 14720 NW 13th Pl

City

Newberry

State

FL

Zip Code

32669

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Not-Employed

Occupation (for Individual)

Retired

Receipt For:

☐ Primary
☐ Other (specify)

General

Aggregate Year-to-Date ▼

125000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 12 / 2016

Transaction ID : 4780593

Amount of Each Receipt this Period

125000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

130500.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 7 OF 38

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

WOMEN VOTE!

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Johns, Lucy, , ,

Mailing Address 561 Greenwich St

City

San Francisco

State

CA

Zip Code

94133

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Planner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

09 / 12 / 2016

Transaction ID : 4765548

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Shenker, Scott, , ,

Mailing Address 66 Southampton Ave.

City

Berkeley

State

CA

Zip Code

94707

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

ICSI

Occupation (for Individual)

Scientist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500000.00

Date of Receipt

09 / 12 / 2016

Transaction ID : 4780592

Amount of Each Receipt this Period

500000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Meislin, Barbara, , ,

Mailing Address P.O. Box 1277

City

Tiburon

State

CA

Zip Code

94920

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Author

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

09 / 13 / 2016

Transaction ID : 4780600

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

502000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 38

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

WOMEN VOTE!

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Couric, Charles, , ,

Mailing Address 421 Fernwood Drive

City
Moraga

State
CA

Zip Code
94556

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Not-Employed

Occupation (for Individual)

Not-Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 14 / 2016

Transaction ID : 4784829

Amount of Each Receipt this Period

10000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Fischer-Davidson, Irene, , ,

Mailing Address 1733 NW 25th Ave.

City
Portland

State
OR

Zip Code
97210

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Not-Employed

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2200.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 15 / 2016

Transaction ID : 4786551

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Walton, Samuel, , ,

Mailing Address PO Box 1860

City
Bentonville

State
AR

Zip Code
72712

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Philanthropist

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

75000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 15 / 2016

Transaction ID : 4790483

Amount of Each Receipt this Period

75000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

86000.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 38

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

WOMEN VOTE!

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Gibbons, Judith, , ,

Mailing Address Po Box 2247

City

Setauket

State

NY

Zip Code

11733

FEC ID number of contributing federal political committee.

C

Name of Employer (for Individual)

Not-Employed

Occupation (for Individual)

Retired

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

30000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 16 / 2016

Transaction ID : 4786937

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hess, Lawrence, , ,

Mailing Address 6309 Cypress Point Road

City

San Diego

State

CA

Zip Code

92120

FEC ID number of contributing federal political committee.

C

Name of Employer (for Individual)

Not-Employed

Occupation (for Individual)

Retired

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

40000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 16 / 2016

Transaction ID : 4786936

Amount of Each Receipt this Period

10000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hess, Lawrence, , ,

Mailing Address 6309 Cypress Point Road

City

San Diego

State

CA

Zip Code

92120

FEC ID number of contributing federal political committee.

C

Name of Employer (for Individual)

Not-Employed

Occupation (for Individual)

Retired

Receipt For:

☐ Primary☐ General☐ Other (specify)

Aggregate Year-to-Date ▼

40000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 16 / 2016

Transaction ID : 4791454

Amount of Each Receipt this Period

10000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

25000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 38

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

WOMEN VOTE!

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hess, Lawrence, , ,

Mailing Address 6309 Cypress Point Road

City
San Diego

State
CA

Zip Code
92120

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Not-Employed

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

40000.00

Date of Receipt

MM / DD / YYYY
09 / 16 / 2016

Transaction ID : 4791455

Amount of Each Receipt this Period

10000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hess, Lawrence, , ,

Mailing Address 6309 Cypress Point Road

City
San Diego

State
CA

Zip Code
92120

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Not-Employed

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

40000.00

Date of Receipt

MM / DD / YYYY
09 / 16 / 2016

Transaction ID : 4791456

Amount of Each Receipt this Period

10000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Cross, Amanda, , ,

Mailing Address 1349 Bay Dr

City
Sanibel

State
FL

Zip Code
33957

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

CWC Software Inc

Occupation (for Individual)

software developer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

MM / DD / YYYY
09 / 19 / 2016

Transaction ID : 4791462

Amount of Each Receipt this Period

10000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 11 OF 38

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

WOMEN VOTE!

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Fikes, Lee, , ,

Mailing Address 3901 Euclid Avenue

City
Dallas

State
TX

Zip Code
75205

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Bonanza Oil Company

Occupation (for Individual)
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : 4791461

Amount of Each Receipt this Period

25000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Rodgers, Janice, , ,

Mailing Address 2100 N Lincoln Park West #12cn

City
Chicago

State
IL

Zip Code
60614

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Quarles & Brady Llp

Occupation (for Individual)
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 20 / 2016

Transaction ID : 4765773

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Michaels, Laurie, , ,

Mailing Address PO Box 158

City
Woody Creek

State
CO

Zip Code
81656

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-Employed

Occupation (for Individual)
Psychologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 23 / 2016

Transaction ID : 4800296

Amount of Each Receipt this Period

75000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

101000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 12 OF 38

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

WOMEN VOTE!

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Michaels, Laurie, , ,

Mailing Address PO Box 158

City
Woody Creek

State
CO

Zip Code
81656

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Psychologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 23 / 2016

Transaction ID : 4802766

Amount of Each Receipt this Period

75000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Mugford, Kristin, , ,

Mailing Address 67 Longfellow Road

City
Wellesley

State
MA

Zip Code
02481

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Harvard Business School

Occupation (for Individual)
Lecturer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 23 / 2016

Transaction ID : 4800294

Amount of Each Receipt this Period

25000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Mugford, Kristin, , ,

Mailing Address 67 Longfellow Road

City
Wellesley

State
MA

Zip Code
02481

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Harvard Business School

Occupation (for Individual)
Lecturer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 23 / 2016

Transaction ID : 4803054

Amount of Each Receipt this Period

25000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

125000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 13 OF 38

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

WOMEN VOTE!

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. O'Connor, Susan, , ,

Mailing Address 125 Bank Street, Suite 300

City
Missoula

State
MT

Zip Code
59802

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

REQUESTED

Occupation (for Individual)

REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 23 / 2016

Transaction ID : 4800293

Amount of Each Receipt this Period

10000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Harris, Susan, , ,

Mailing Address 20 Child St Apt 407

City

Cambridge

State

MA

Zip Code

02141

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Boston Children's Hospital

Occupation (for Individual)

Chaplain

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 25 / 2016

Transaction ID : 4802301

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Arnold, Robert, , ,

Mailing Address 5843 Vallejo St.

City

Emeryville

State

CA

Zip Code

94608

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Perforce Software, Inc.

Occupation (for Individual)

Systems Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 27 / 2016

Transaction ID : 4807769

Amount of Each Receipt this Period

15000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

25250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 14 OF 38

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

WOMEN VOTE!

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. EXPS, LLC

Mailing Address PO Box 2548

City

San Francisco

State

CA

Zip Code

94126

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

MM / DD / YYYY
09 / 29 / 2016

Transaction ID : 4815905

Amount of Each Receipt this Period

25000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Dermody, Kelly, , ,

Mailing Address 675 Arkansas Street

City

San Francisco

State

CA

Zip Code

94107

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Lief, Cabraser, Heimann & Bernstein

Occupation (for Individual)
Lawyer

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

MM / DD / YYYY
09 / 30 / 2016

Transaction ID : 4816635

Amount of Each Receipt this Period

10000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hirschi, John, , ,

Mailing Address 33305 Buchanan

City

Wichita Falls

State

TX

Zip Code

76308

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-Employed

Occupation (for Individual)
Real Estate

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY
09 / 30 / 2016

Transaction ID : 4819784

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

36000.00

1060750.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 OF 38
(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

WOMEN VOTE!

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Majority Forward

Mailing Address c/o Perkins Coie

700 13th Street NW, Ste 600

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

467866.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2016

Transaction ID : 4776630

Amount of Each Receipt this Period

220000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. International Union of Operating Engineers Local 66

Mailing Address 111 Zeta Drive

City

Pittsburgh

State

PA

Zip Code

15238

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

58000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 20 / 2016

Transaction ID : 4791453

Amount of Each Receipt this Period

33000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Priorities USA

Mailing Address 1718 M Street NW #204

City

Washington

State

DC

Zip Code

20036

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

12770000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 20 / 2016

Transaction ID : 4791501

Amount of Each Receipt this Period

2000000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

2253000.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 OF 38
(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

WOMEN VOTE!

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. United Association Political Education Committee

Mailing Address Three Park Place

City
Annapolis

State
MD

Zip Code
21401

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

MM / DD / YYYY
09 / 20 / 2016

Transaction ID : 4791561

Amount of Each Receipt this Period

100000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. America Votes Action Fund

Mailing Address 1155 Connecticut Ave NW Ste 600

City
Washington

State
DC

Zip Code
20036

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

30000.00

Date of Receipt

MM / DD / YYYY
09 / 23 / 2016

Transaction ID : 4800295

Amount of Each Receipt this Period

30000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Priorities USA

Mailing Address 1718 M Street NW #204

City
Washington

State
DC

Zip Code
20036

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

12770000.00

Date of Receipt

MM / DD / YYYY
09 / 30 / 2016

Transaction ID : 4815906

Amount of Each Receipt this Period

2000000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2130000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 OF 38
(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

WOMEN VOTE!

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Sheet Metal Workers' Political Action League

Mailing Address 1750 New York Ave NW

City
Washington

State
DC

Zip Code
20006

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

62500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2016

Transaction ID : 4814292

Amount of Each Receipt this Period

50000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

50000.00

4433000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 OF 38

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	--	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

WOMEN VOTE!

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
PRIORITIES USA ACTION AND EMILY'S LIST WOMEN VOTE! JOINT FUNDRAISING COMMITTEE

Mailing Address 1800 M Street NW
Suite 375N

City
Washington

State
DC

Zip Code
20036

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

947000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 28 / 2016

Transaction ID : 47731420

Amount of Each Receipt this Period

92000.00

☐ Memo Item

Distribution of Joint Fundraising Funds - See Attribution
Below

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
AFT Solidarity 527

Mailing Address 555 New Jersey Ave NW

City
Washington

State
DC

Zip Code
20001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

497000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 25 / 2016

Transaction ID : 47731440

Amount of Each Receipt this Period

2000.00

☒ Memo Item

Transfer from PRIORITIES USA ACTION AND EMILY'S
LIST WOMEN VOTE! JOINT FUNDRAISING
COMMITTEE

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Cofrin, Gladys, , ,

Mailing Address 14720 NW 13th Pl

City
Newberry

State
FL

Zip Code
32669

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Not-Employed

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 20 / 2016

Transaction ID : 47731430

Amount of Each Receipt this Period

90000.00

☒ Memo Item

Transfer from PRIORITIES USA ACTION AND EMILY'S
LIST WOMEN VOTE! JOINT FUNDRAISING
COMMITTEE

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

92000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 OF 38

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

WOMEN VOTE!

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. EMILY's List

Mailing Address 1800 M Street NW
Suite 375N

City
Washington

State
DC

Zip Code
20036

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4954.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 15 / 2016

Transaction ID : 9152016

Amount of Each Receipt this Period

4954.50

☐ Memo Item
Transfer from Affiliate

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

4954.50

96954.50

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 20 OF 38

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

WOMEN VOTE!

Full Name (Last, First, Middle Initial)

A. Shepardson, Stern & Kaminsky

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	1			2	0	1	6		

Mailing Address 88 Pine St.

City
New YorkState
NYZip Code
10005Purpose of Disbursement
Consulting Fundraising

Candidate Name

Category/
TypeOffice Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

FEC Identification Number

C**Transaction ID : SB21B-867**

Amount of Each Disbursement this Period

50000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Authorize.net

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	2			2	0	1	6		

Mailing Address 808 East Utah Valley Drive

City
American ForkState
UTZip Code
84003Purpose of Disbursement
Credit Card Service Charges

Candidate Name

Category/
TypeOffice Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

FEC Identification Number

C**Transaction ID : SB21B-888**

Amount of Each Disbursement this Period

82.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. First Data Merchant Services

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	6			2	0	1	6		

Mailing Address PO Box 6010

City
HagerstownState
MDZip Code
21741Purpose of Disbursement
Credit Card Service Charges

Candidate Name

Category/
TypeOffice Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

FEC Identification Number

C**Transaction ID : SB21B-889**

Amount of Each Disbursement this Period

1265.37

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

51347.37

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 21 OF 38

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

WOMEN VOTE!

Full Name (Last, First, Middle Initial)

A. Blackbaud Merchant Services

Mailing Address 2000 Daniel Island Drive

City
CharlestonState
SCZip Code
29492Purpose of Disbursement
Credit Card Service Charges

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		08		2016

FEC Identification Number

C**Transaction ID : SB21B-890**

Amount of Each Disbursement this Period

91.45

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Blackbaud Merchant Services

Mailing Address 2000 Daniel Island Drive

City
CharlestonState
SCZip Code
29492Purpose of Disbursement
Credit Card Service Charges

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		14		2016

FEC Identification Number

C**Transaction ID : SB21B-891**

Amount of Each Disbursement this Period

13.25

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Anzalone Liszt Grove Research, Inc.Mailing Address 260 Commerce Street
4th FloorCity
MontgomeryState
ALZip Code
36104Purpose of Disbursement
Polling/Surveys

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		15		2016

FEC Identification Number

C**Transaction ID : SB21B-878**

Amount of Each Disbursement this Period

26900.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

27004.70

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 22 OF 38

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

WOMEN VOTE!

Full Name (Last, First, Middle Initial)

A. Hickman Analytics Inc

Mailing Address 2 Wisconsin Circle, Suite 520

City
Chevy ChaseState
MDZip Code
20815Purpose of Disbursement
Polling/Surveys

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C**Transaction ID : SB21B-879**

Amount of Each Disbursement this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Hickman Analytics Inc

Mailing Address 2 Wisconsin Circle, Suite 520

City
Chevy ChaseState
MDZip Code
20815Purpose of Disbursement
Polling/Surveys

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C**Transaction ID : SB21B-885**

Amount of Each Disbursement this Period

21500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Blackbaud Merchant Services

Mailing Address 2000 Daniel Island Drive

City
CharlestonState
SCZip Code
29492Purpose of Disbursement
Credit Card Service Charges

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C**Transaction ID : SB21B-892**

Amount of Each Disbursement this Period

26.24

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

23026.24

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 23 OF 38

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

WOMEN VOTE!

Full Name (Last, First, Middle Initial)

A. Hart Research Associates

Mailing Address 1724 Connecticut Ave, NW

City
WashingtonState
DCZip Code
20009Purpose of Disbursement
Polling/Surveys

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
09		29		2016

FEC Identification Number

C**Transaction ID : SB21B-896**

Amount of Each Disbursement this Period

40000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

40000.00

TOTAL This Period (last page this line number only).....▶

141378.31

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 24 OF 38

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

WOMEN VOTE!

Full Name (Last, First, Middle Initial)

A. America Votes Action FundMailing Address 1155 Connecticut Ave NW
Ste 600City
WashingtonState
DCZip Code
20036Purpose of Disbursement
Committee Contribution

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2016

FEC Identification Number

C**Transaction ID : SB23-866**

Amount of Each Disbursement this Period

25000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

25000.00

25000.00

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 26 OF 38
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WOMEN VOTE!				FEC IDENTIFICATION NUMBER ▼ C C00473918	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee AL Media LLC			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 06 / 2016		
Mailing Address 222 W Ontario St Ste 600			Amount 64925.00		
City Chicago	State IL	Zip Code 60654-3655	Transaction ID : VN7A7A2Z403 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 06 / 2016		
Purpose of Expenditure Media Buy and Production - Digital		Category/ Type 004			
Name of Federal Candidate: Rochester, Lisa Blunt, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 00 State: DE		
Calendar Year-To-Date Per Election for Office Sought 190702.34			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Ambrosino Muir Hansan Crounse			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 12 / 2016		
Mailing Address 5500 Sansome Street Suite 404			Amount 119370.00		
City Washington	State DC	Zip Code 94111	Transaction ID : VN7A7A381X5 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 07 / 2016		
Purpose of Expenditure Mailhouse		Category/ Type 004			
Name of Federal Candidate: Toomey, Patrick, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 State: PA		
Calendar Year-To-Date Per Election for Office Sought 2048518.29			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			184295.00		
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Fines, Caroline, , , Signature		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 10 / 20 / 2016	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 27 OF 38
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WOMEN VOTE!				FEC IDENTIFICATION NUMBER ▼ C C00473918	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Ambrosino Muir Hansan Crounse			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 16 / 2016		
Mailing Address 5500 Sansome Street Suite 404			Amount 119370.00		
City Washington		State DC	Zip Code 94111		Transaction ID : VN7A7A3E7H2
Purpose of Expenditure Mailhouse		Category/ Type 004		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 13 / 2016	
Name of Federal Candidate: Toomey, Patrick, , ,			Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: PA		
Calendar Year-To-Date Per Election for Office Sought 2048518.29			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Ambrosino Muir Hansan Crounse			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 20 / 2016		
Mailing Address 5500 Sansome Street Suite 404			Amount 119370.00		
City Washington		State DC	Zip Code 94111		Transaction ID : VN7A7A3N5Y5
Purpose of Expenditure Mailhouse		Category/ Type 004		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 15 / 2016	
Name of Federal Candidate: Toomey, Patrick, , ,			Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: PA		
Calendar Year-To-Date Per Election for Office Sought 2048518.29			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			238740.00		
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Fines, Caroline, , , Signature			[Electronically Filed] Date M M / D D / Y Y Y Y Y Y 10 / 20 / 2016		

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 28 OF 38
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WOMEN VOTE!				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00473918 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>					
Full Name of Payee <input type="checkbox"/> Memo Item Ambrosino Muir Hansan Crounse				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div>09</div> <div>23</div> <div>2016</div> </div>	
Mailing Address 5500 Sansome Street Suite 404				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">119370.00</div>	
City Washington		State DC		Zip Code 94111	
Purpose of Expenditure Mailhouse				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: Toomey, Patrick, , ,				Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: PA	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">2048518.29</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input type="checkbox"/> Memo Item Ambrosino Muir Hansan Crounse				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div>09</div> <div>28</div> <div>2016</div> </div>	
Mailing Address 5500 Sansome Street Suite 404				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">119370.00</div>	
City Washington		State DC		Zip Code 94111	
Purpose of Expenditure Mailhouse				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: Toomey, Patrick, , ,				Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: PA	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">2048518.29</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
<div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="width: 60%;"> (a) SUBTOTAL of Itemized Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">238740.00</div> </div> </div> <div style="display: flex; justify-content: space-between; align-items: flex-end; margin-top: 10px;"> <div style="width: 60%;"> (a) SUBTOTAL of Unitemized Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> </div> </div> <div style="display: flex; justify-content: space-between; align-items: flex-end; margin-top: 10px;"> <div style="width: 60%;"> (a) TOTAL Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Fines, Caroline, , , Signature				<div style="display: flex; justify-content: space-between; align-items: center;"> <div style="text-align: center;"> [Electronically Filed] </div> <div style="text-align: center;"> Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M M</div> / <div style="border: 1px solid black; padding: 2px; display: inline-block;">D D D</div> / <div style="border: 1px solid black; padding: 2px; display: inline-block;">Y Y Y Y Y Y</div> 10 / 20 / 2016 </div> </div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 29 OF 38
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WOMEN VOTE!				FEC IDENTIFICATION NUMBER ▼ C C00473918	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on MM / DD / YYYY	
Full Name of Payee Analyst Institute, LLC			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 27 / 2016		
Mailing Address 815 16th St NW			Amount 5500.00		
City Washington	State DC	Zip Code 20006-4101	Transaction ID : VN7A7A424V2		
Purpose of Expenditure Media Buy and Production - Digital		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 29 / 2016		
Name of Federal Candidate: Trump, Donald, J., ,			Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: 00		
Calendar Year-To-Date Per Election for Office Sought 4044318.66			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Analyst Institute, LLC			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 27 / 2016		
Mailing Address 815 16th St NW			Amount 5500.00		
City Washington	State DC	Zip Code 20006-4101	Transaction ID : VN7A7A424W0		
Purpose of Expenditure Media Buy and Production - Digital		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 29 / 2016		
Name of Federal Candidate: Clinton, Hillary Rodham, , ,			Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: 00		
Calendar Year-To-Date Per Election for Office Sought 4044318.66			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			11000.00		
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Fines, Caroline, , , Signature		[Electronically Filed]		Date MM / DD / YYYY 10 / 20 / 2016	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 30 OF 38
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WOMEN VOTE!				FEC IDENTIFICATION NUMBER ▼ C C00473918	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Dixon / Davis Media Group, LLC			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 23 / 2016		
Mailing Address 1028 33rd St NW Ste 300			Amount 21224.00		
City Washington		State DC	Zip Code 20007-3571		Transaction ID : VN7A7A3W7F6
Purpose of Expenditure Media Production		Category/Type 001		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 29 / 2016	
Name of Federal Candidate: Burr, Richard, , ,			Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Dixon / Davis Media Group, LLC			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 24 / 2016		
Mailing Address 1028 33rd St NW Ste 300			Amount 14653.00		
City Washington		State DC	Zip Code 20007-3571		Transaction ID : VN7A7A3ZR08
Purpose of Expenditure Media Production		Category/Type 001		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 29 / 2016	
Name of Federal Candidate: Heck, Joe, , ,			Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NV		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			35877.00		
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Fines, Caroline, , , Signature		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 10 / 20 / 2016	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 31 OF 38
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WOMEN VOTE!				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00473918 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on MM / DD / YYYY					
Full Name of Payee <input type="checkbox"/> Memo Item NGP Van Inc				Date of Public Distribution/Dissemination <div style="text-align: center;">MM / DD / YYYY</div> <div style="text-align: center;">09 / 02 / 2016</div>	
Mailing Address 48 Grove St Ste 202				Amount <div style="text-align: center;">710.03</div>	
City Somerville		State MA	Zip Code 02144-2500	Transaction ID : VN7A7A2V859 Date of Disbursement or Obligation <div style="text-align: center;">MM / DD / YYYY</div> <div style="text-align: center;">09 / 08 / 2016</div>	
Purpose of Expenditure Mailhouse		Category/Type 004			
Name of Federal Candidate: Rochester, Lisa Blunt, , ,				Office Sought: <input checked="" type="checkbox"/> House District: 00 <input type="checkbox"/> President <input type="checkbox"/> Senate State: DE	
Calendar Year-To-Date Per Election for Office Sought				Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input type="checkbox"/> Memo Item Precision Network, LLC				Date of Public Distribution/Dissemination <div style="text-align: center;">MM / DD / YYYY</div> <div style="text-align: center;">09 / 20 / 2016</div>	
Mailing Address 1140 Connecticut Ave NW Ste 800				Amount <div style="text-align: center;">123897.53</div>	
City Washington		State DC	Zip Code 20036-4010	Transaction ID : VN7A7A3N5X7 Date of Disbursement or Obligation <div style="text-align: center;">MM / DD / YYYY</div> <div style="text-align: center;">09 / 15 / 2016</div>	
Purpose of Expenditure Media Buy Digital		Category/Type 004			
Name of Federal Candidate: Clinton, Hillary Rodham, , ,				Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: 00	
Calendar Year-To-Date Per Election for Office Sought				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures				<div style="text-align: center;">124607.56</div>	
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Fines, Caroline, , , Signature				Date MM / DD / YYYY <div style="text-align: center;">10 / 20 / 2016</div>	

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 32 OF 38
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WOMEN VOTE!				FEC IDENTIFICATION NUMBER ▼ C C00473918	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee SKDKnickerbocker LLC			<input type="checkbox"/> Memo Item		
Mailing Address 1818 N St NW Ste 450			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 14 / 2016		
City Washington		State DC	Zip Code 20036-2473		
Purpose of Expenditure Media Production		Category/ Type 004		Amount 5334.91	
Name of Federal Candidate: Ayotte, Kelly, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought 197833.41			Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NH Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee SKDKnickerbocker LLC			<input type="checkbox"/> Memo Item		
Mailing Address 1818 N St NW Ste 450			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 14 / 2016		
City Washington		State DC	Zip Code 20036-2473		
Purpose of Expenditure Media Production		Category/ Type 004		Amount 5334.90	
Name of Federal Candidate: Trump, Donald, J., ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought 4044318.66			Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: 00 Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			10669.81		
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Fines, Caroline, , , Signature			[Electronically Filed] Date M M / D D / Y Y Y Y Y Y 10 / 20 / 2016		

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 33 OF 38
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WOMEN VOTE!			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00473918 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y				
Full Name of Payee <input type="checkbox"/> Memo Item Teal Media			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y <div style="display: flex; justify-content: space-around;"> 09 02 2016 </div>	
Mailing Address 704 G St NE			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">14487.50</div>	
City Washington	State DC	Zip Code 20002-3606	Transaction ID : VN7A7A2V8H4 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y <div style="display: flex; justify-content: space-around;"> 09 15 2016 </div>	
Purpose of Expenditure Web Design and Production (previously reported as an estimate of \$20,000)			Category/Type 004	
Name of Federal Candidate: Clinton, Hillary Rodham, , ,			<div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose </div> <div> Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: 00 </div> </div>	
Calendar Year-To-Date Per Election for Office Sought 4044318.66			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input type="checkbox"/> Memo Item The Pivot Group, Inc.			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y <div style="display: flex; justify-content: space-around;"> 09 02 2016 </div>	
Mailing Address 1720 I St NW Ste 550			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">45756.98</div>	
City Washington	State DC	Zip Code 20006-3741	Transaction ID : VN7A7A2SJQ8 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y <div style="display: flex; justify-content: space-around;"> 09 01 2016 </div>	
Purpose of Expenditure Mailhouse			Category/Type 004	
Name of Federal Candidate: Heck, Joe, , ,			<div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose </div> <div> Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NV </div> </div>	
Calendar Year-To-Date Per Election for Office Sought 1156633.76			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; display: inline-block;">60244.48</div>	
(a) SUBTOTAL of Unitemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
(a) TOTAL Independent Expenditures			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Fines, Caroline, , , Signature			<div style="display: flex; justify-content: space-between;"> <div> [Electronically Filed] </div> <div> Date M M / D D / Y Y Y Y Y Y <div style="display: flex; justify-content: space-around;"> 10 20 2016 </div> </div> </div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 34 OF 38
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WOMEN VOTE!				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00473918 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on MM / DD / YYYY					
Full Name of Payee <input type="checkbox"/> Memo Item The Pivot Group, Inc.				Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 02 / 2016	
Mailing Address 1720 I St NW Ste 550				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">21631.61</div>	
City Washington		State DC		Zip Code 20006-3741	
Purpose of Expenditure Mailhouse				Category/Type 004	
Name of Federal Candidate: Rochester, Lisa Blunt, , ,				Office Sought: <input checked="" type="checkbox"/> House District: 00 <input type="checkbox"/> President <input type="checkbox"/> Senate State: DE	
Calendar Year-To-Date Per Election for Office Sought 190702.34				Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ►	
Full Name of Payee <input type="checkbox"/> Memo Item The Pivot Group, Inc.				Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 06 / 2016	
Mailing Address 1720 I St NW Ste 550				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">21631.61</div>	
City Washington		State DC		Zip Code 20006-3741	
Purpose of Expenditure Mailhouse				Category/Type 004	
Name of Federal Candidate: Rochester, Lisa Blunt, , ,				Office Sought: <input checked="" type="checkbox"/> House District: 00 <input type="checkbox"/> President <input type="checkbox"/> Senate State: DE	
Calendar Year-To-Date Per Election for Office Sought 190702.34				Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ►	
<div style="display: flex; justify-content: space-between;"> <div> (a) SUBTOTAL of Itemized Independent Expenditures </div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">43263.22</div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div>(a) SUBTOTAL of Unitemized Independent Expenditures</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div>(a) TOTAL Independent Expenditures</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Fines, Caroline, , , Signature				Date MM / DD / YYYY 10 / 20 / 2016	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 35 OF 38
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WOMEN VOTE!				FEC IDENTIFICATION NUMBER ▼ C C00473918	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee The Pivot Group, Inc.			<input type="checkbox"/> Memo Item		
Mailing Address 1720 I St NW Ste 550			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 06 / 2016		
City Washington		State DC	Zip Code 20006-3741		
Purpose of Expenditure Mailhouse		Category/ Type 004		Amount 86733.38	
Name of Federal Candidate: Heck, Joe, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought 1156633.76			Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NV Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee The Pivot Group, Inc.			<input type="checkbox"/> Memo Item		
Mailing Address 1720 I St NW Ste 550			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 08 / 2016		
City Washington		State DC	Zip Code 20006-3741		
Purpose of Expenditure Mailhouse		Category/ Type 004		Amount 21631.61	
Name of Federal Candidate: Rochester, Lisa Blunt, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought 190702.34			Office Sought: <input checked="" type="checkbox"/> House District: 00 <input type="checkbox"/> President <input type="checkbox"/> Senate State: DE Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			108364.99		
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Fines, Caroline, , ,		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 10 / 20 / 2016	
Signature					

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 36 OF 38
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WOMEN VOTE!				FEC IDENTIFICATION NUMBER ▼ C C00473918	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee The Pivot Group, Inc.			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 09 / 2016		
Mailing Address 1720 I St NW Ste 550			Amount 45756.98		
City Washington		State DC	Zip Code 20006-3741		Transaction ID : VN7A7A35AP6
Purpose of Expenditure Mailhouse		Category/Type 004		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 01 / 2016	
Name of Federal Candidate: Heck, Joe, , ,			Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NV		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Waterfront Strategies			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 20 / 2016		
Mailing Address 3050 K St NW Ste 100			Amount 839790.00		
City Washington		State DC	Zip Code 20007-5161		Transaction ID : VN7A7A3N5Z3
Purpose of Expenditure Media Buy TV		Category/Type 004		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 09 / 2016	
Name of Federal Candidate: Heck, Joe, , ,			Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NV		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures				885546.98	
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Fines, Caroline, , , Signature			Date M M / D D / Y Y Y Y Y Y 10 / 20 / 2016		

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 37 OF 38
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WOMEN VOTE!				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00473918 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on MM / DD / YYYY					
Full Name of Payee <input type="checkbox"/> Memo Item Waterfront Strategies				Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 14 / 2016	
Mailing Address 3050 K St NW Ste 100				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">192498.50</div>	
City Washington		State DC		Zip Code 20007-5161	
Purpose of Expenditure Media Buy TV				Category/Type 004	
Name of Federal Candidate: <input type="checkbox"/> Support Trump, Donald, J., , <input checked="" type="checkbox"/> Oppose				Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: 00	
Calendar Year-To-Date Per Election for Office Sought 4044318.66				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input type="checkbox"/> Memo Item Waterfront Strategies				Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 14 / 2016	
Mailing Address 3050 K St NW Ste 100				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">192498.50</div>	
City Washington		State DC		Zip Code 20007-5161	
Purpose of Expenditure Media Buy TV				Category/Type 004	
Name of Federal Candidate: <input type="checkbox"/> Support Ayotte, Kelly, , , <input checked="" type="checkbox"/> Oppose				Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NH	
Calendar Year-To-Date Per Election for Office Sought 197833.41				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
<div style="display: flex; justify-content: space-between;"> <div> (a) SUBTOTAL of Itemized Independent Expenditures (a) SUBTOTAL of Unitemized Independent Expenditures (a) TOTAL Independent Expenditures </div> <div style="text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">384997.00</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Fines, Caroline, , , [Electronically Filed] Signature				Date MM / DD / YYYY 10 / 20 / 2016	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 38 OF 38
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WOMEN VOTE!				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00473918 </div>							
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶				New report Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>							
Full Name of Payee <input type="checkbox"/> Memo Item Waterfront Strategies			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 09 / 23 / 2016 </div>								
Mailing Address 3050 K St NW Ste 100			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 1746540.00 </div>								
City Washington	State DC	Zip Code 20007-5161	Transaction ID : VN7A7A3W1K5 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 09 / 21 / 2016 </div>								
Purpose of Expenditure Media Buy TV		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Burr, Richard, , ,								
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 1767764.00 </div>	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶								
Full Name of Payee <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>								
Mailing Address			Amount								
City	State	Zip Code	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 1746540.00 </div>								
Purpose of Expenditure		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>								
Name of Federal Candidate:		<input type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____								
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 1746540.00 </div>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶								
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">(a) SUBTOTAL of Itemized Independent Expenditures</td> <td style="width: 40%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">1746540.00</div> </td> </tr> <tr> <td>(a) SUBTOTAL of Unitemized Independent Expenditures</td> <td style="text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> </td> </tr> <tr> <td>(a) TOTAL Independent Expenditures</td> <td style="text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">4104010.41</div> </td> </tr> </table>						(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;">1746540.00</div>	(a) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	(a) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;">4104010.41</div>
(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;">1746540.00</div>										
(a) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>										
(a) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;">4104010.41</div>										
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.											
Fines, Caroline, , , Signature		[Electronically Filed]		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 20 / 2016 </div>							